

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b>				<b>1. Requisition Number</b> SEE SCHEDULE		<b>Page</b> 1 <b>Of</b> 4	
<b>Offeror To Complete Block 12, 17, 23, 24, &amp; 30</b>							
<b>2. Contract No.</b> DAAE20-99-D-0135		<b>3. Award/Effective Date</b> 1999SEP23		<b>4. Order Number</b>		<b>5. Solicitation Number</b> DAAE20-99-R-0211	
<b>6. Solicitation Issue Date</b> 1999AUG26		<b>7. For Solicitation Information Call:</b>		<b>A. Name</b> ELVIA JAGGERS		<b>B. Telephone Number (No Collect Calls)</b> (309) 782-3271	
<b>8. Offer Due Date/Local Time</b>		<b>9. Issued By</b> TACOM-ROCK ISLAND AMSTA-LC-CSC-C ROCK ISLAND IL 61299-7630		<b>Code</b> W52H09		<b>10. This Acquisition Is</b> <input type="checkbox"/> Unrestricted <input checked="" type="checkbox"/> Set Aside: % For <input checked="" type="checkbox"/> Small Business <input type="checkbox"/> Small Disadv Business <input type="checkbox"/> 8(A) SIC: 3421 Size Standard:	
<b>11. Delivery For FOB Destination Unless Block Is Marked</b> <input checked="" type="checkbox"/> See Schedule		<b>12. Discount Terms</b>		<b>13a. This Contract Is A Rated Order Under DPAS (18 CFR 700)</b> <input checked="" type="checkbox"/>		<b>13b. Rating</b> DOA5	
<b>14. Method Of Solicitation</b> <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input checked="" type="checkbox"/> RFP		<b>15. Deliver To</b> SEE SCHEDULE		<b>Code</b>		<b>16. Administered By</b> DCMC SYRACUSE-BUFFALO T J DULSKI FEDERAL BUILDING ROOM 1103 111 WEST HURON ST BUFFALO NY 14202-2392	
<b>17. Contractor/Offeror</b> ONTARIO KNIFE COMPANY 26 EMPIRE STREET FRANKLINVILLE NY 14737-0000		<b>Code</b> 2V376 <b>Facility</b>		<b>18a. Payment Will Be Made By</b> DFAS-COLUMBUS CENTER DFAS-CO-JNB/BUNKER HILL P O BOX 182077 COLUMBUS OH 43218-2077		<b>Code</b> SC1016	
<b>18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked</b> <input type="checkbox"/> See Addendum		<b>17b. Check If Remittance Is Different And Put Such Address In Offer</b> <input type="checkbox"/>		<b>19. Item No.</b>		<b>20. Schedule Of Supplies/Services</b> SEE SCHEDULE Contract Expiration Date: 2004SEP30 (Attach Additional Sheets As Necessary)	
<b>21. Quantity</b>		<b>22. Unit</b>		<b>23. Unit Price</b>		<b>24. Amount</b>	
<b>25. Accounting And Appropriation Data</b>				<b>26. Total Award Amount (For Govt. Use Only)</b> \$0.00			
<input checked="" type="checkbox"/> 27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4. FAR 52.212-3 And 52.212-5 Are Attached.				<input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.			
<input checked="" type="checkbox"/> 27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda				<input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.			
<b>28. Contractor Is Required To Sign This Document And Return _____ Copies</b> <input type="checkbox"/> To Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein.				<b>29. Award Of Contract: Reference _____ Offer</b> <input type="checkbox"/> Dated 1999SEP09. Your Offer On Solicitation (Block 5) Including Any Additions Or Changes Which Are Set Forth Herein Is Accepted As To Items:			
<b>30a. Signature Of Offeror/Contractor</b>				<b>31a. United States Of America (Signature Of Contracting Officer)</b>			
<b>30b. Name And Title Of Signer (Type Or Print)</b>		<b>30c. Date Signed</b>		<b>31b. Name Of Contracting Officer (Type Or Print)</b> ROXANNE SPURGETIS SPURGETISR@RIA.ARMY.MIL (309) 782-4886		<b>31c. Date Signed</b>	
<b>32a. Quantity In Column 21 Has Been</b> <input type="checkbox"/> Received <input type="checkbox"/> Inspected <input type="checkbox"/> Accepted And Conforms To The Contract Except As Noted				<b>33. Ship Number</b> <input type="checkbox"/> Partial <input type="checkbox"/> Final		<b>34. Voucher Number</b>	
<b>32b. Signature Of Authorized Government Representative</b>				<b>32c. Date</b>		<b>35. Amount Verified Correct For</b>	
<b>41a. I Certify This Account Is Correct And Proper For Payment</b>				<b>42a. Received By (Print)</b>		<b>37. Check Number</b>	
<b>41b. Signature And Title Of Certifying Officer</b>				<b>41c. Date</b>		<b>40. Paid By</b>	
<b>42b. Received At (Location)</b>				<b>42c. Date Recd (YYMMDD)</b>		<b>42d. Total Containers</b>	

<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b>  <b>PIIN/SIIN</b> DAAE20-99-D-0135 <b>MOD/AMD</b>	<b>Page</b> 2 <b>of</b> 4
<b>Name of Offeror or Contractor:</b> ONTARIO KNIFE COMPANY		

SUPPLEMENTAL INFORMATION

- 1. THIS AWARD IS FOR A FIRM FIXED PRICE FIVE YEAR INDEFINITE DELIVERY INDEFINITE QUANTITY TYPE CONTRACT FOR THE FOLLOWING ITEMS:
  - A. BAYONET AND SCABBARD, NSN: 1095-01-227-1739, P/N: 12011860.
  - B. SIX SPARE PARTS LISTED ON THE PRICING SUMMARY SHEET, ATTACHMENT 001.
- 2. THE GUARANTEED QUANTITY OF 12,500 EACH, BAYONET AND SCABBARD, NSN: 1095-01-227-1739, P/N: 12011860 SHALL BE AWARDED CONCURRENTLY UNDER DELIVERY ORDER 0001. DELIVERY ORDER 0001 WILL BE ISSUED SEPARATELY FOR THIS OBLIGATION.
- 3. THE CEILING PRICES FOR ALL FIVE PRICING PERIODS (BAYONET AND SCABBARD AND SIX SPARE PARTS) ARE LISTED ON ATTACHMENT 001.
- 4. THE SIGNATURE PAGE FROM SOLICITATION DAAE20-99-R-0211 IS INCORPORATED AS ATTACHMENT 002.
- 5. IN THE EVENT THAT THE GOVERNMENT EXERCISES A DELIVERY ORDER(S), THE GOVERNMENT AT THAT TIME WILL SPECIFY THE ITEMS TO BE DELIVERED ALONG WITH THE APPROPRIATE CLIN NUMBERS.
- 6. ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME.

\*\*\* END OF NARRATIVE A001 \*\*\*

Name of Offeror or Contractor: ONTARIO KNIFE COMPANY

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0007	<p>SUPPLIES OR SERVICES AND PRICES/COSTS</p> <p><u>Supplies or Services and Prices/Costs</u></p> <p><u>DATA ITEM</u></p> <p>NOUN: DATA ITEM SECURITY CLASS: Unclassified Contractor will prepare and deliver the technical data in accordance with the requirements, quantities and schedules set forth in the Contract Data Requirements Lists (DD Form 1423), Exhibit A.</p> <p>A DD 250 IS NOT REQUIRED.</p> <p>(End of narrative B001)</p> <p><u>Inspection and Acceptance</u> INSPECTION: DestinationACCEPTANCE: Destination</p>				

CONTINUATION SHEET	Reference No. of Document Being Continued		Page 4 of 4
	PIIN/SIIN DAAE20-99-D-0135	MOD/AMD	
Name of Offeror or Contractor: ONTARIO KNIFE COMPANY			

LIST OF ATTACHMENTS

List of Addenda	Title	Date	Number of Pages	Transmitted By
Attachment 001	PRICING SUMMARY		001	
Attachment 002	SIGNATURE PAGE		002	